



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant (s	3):	Inomas M. Jessell et a	I.	
Serial No.	: .	09/654,462	Examiner: A. Falk	
Filed	:	September 1, 2000	Group Art Unit: 1632	
For	: .	GENETIC DEMONSTRATION	OF REQUIREMENT FOR NKX6.1 AND	
	-	NKX2.2 IN VENTRAL NEUR	ON GENERATION	
Mail Stop R COMMISSIONE P.O. Box 14 Alexandria,	ER F0		Date: <u>October 29, 200</u>	<u> </u>
Sir:			•	
Transmitted	i he:	rewith is an amendment	to the above-identified applie	cation

X	Small entity status of this application under 37
	C.F.R. §1.9 and §1.27 has been previously established.
	A verified statement to establish small entity

status under 37 C.F.R. §1.9 and §1.27 is enclosed.

No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend- ment	Highest Number Previou Paid Fo	sly	Number Extra Clair Prese	a ms		RA Small Entity	TE Other Entity		Small Entity	Other Entity
Total Claims	3 -	* 20	=	***	0	x	\$25	\$50	_	\$ 0	
Indepen -dent Claims	1 _	** 3	=	***	0	x	\$105	\$210	=	\$0	
	Dependen Time		s) Pr X	esente _No	ed		\$185	\$370	=		
							TOTAL A	DDITIONAL	<u> </u>	\$ 0	

The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.
If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

	Thomas M. Jessell et al.
Serial No. :	09/654,462
Filed :	September 1, 2000
Amendment Tran Page 2	smittal Letter
The following	are also enclosed:
X One addi	tional copy of this Amendment Transmittal Letter
X Return R	eceipt Postcard
An Infor	mation Disclosure Statement, including Form PTO-1449
(Copies o	of citations included: Yes No
and a f	ee of \$included)
A Petit	ion for an Extension of Time, including a fee of
\$	for a Petition for Month(s) Extension of Time
<u> </u>	dentify): Request For Continued Examination Transmittal
	
THE TOTAL FEE	DUE IS \$ 405.00
X A check	in the amount of \$ 405.00 is enclosed.
Please ch	narge Deposit Account No in the amount of
\$	·
	ssioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. 03-3125
	s under 37 C.F.R. §1.16 for the presentation of extra claims ent application processing fees under 37 C.F.R. §1.17
	Respectfully submitted,
	Sol Duct
correspondence is date with the U.S.	Patents 1185 Avenue of the Americas New York, New York 10036
John P. White Reg. No. 28,678	Date